2809 11:47 FR THOMSON LICENSING 609 734 6888 TO 815712732885 P.02/03 PART B - FEE(S) TRANSMITTAL Complete and segulthis form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 24498 Total Pgs Faxed 2 or Fax (571)-273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Now: Uso Block 1 for any change of address) Robert D. Shedd, Vice President 7590 09/06/2009 24498 Certificate of Mailing or Transmission I hereby certify that this Feo(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimite transmitted to the USPTO (571) 273-2885, on the date indicated below. Thomson Licensing LLC P.O. Box 5312 Two Independence Way PRINCETON, NJ 08543-5312 VERY ANGIER Us. Vovember 2006 CONFIRMATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR FILING DATE APPLICATION NO. 5918 PD040007 07/10/2006 Joachim Knittel 10/585,536 10585536 TITLE OF INVENTION: METHOD FOR DETERMINING SPHERICAL ABERRATION 11/06/2009 HDESTA2 00000153 070832 01 FC:1501 1510.00 DA 02 FC:1504 300.00 DA PUBLICATION FEE DUE PREVE PAID ISSUE FEB POTAL PEE(S) DUE DATE DUE SMALL ENTITY ISSUE FEE DUE APPLN. TYPE 11/06/2009 \$300 \$0 \$1810 NO \$1510 nonprovisional CLASS-SUBCLASS **EXAMINER** ART UNIT 356-239200 PUNNOOSE, ROY M 2886 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Robert D. Shedd (1) the names of up to 3 registered patent attoracys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agont) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 Harvey D. "Fcc Address" indication (or "Fcc Address" Indication form PTO/SB/47; Rcv 03-02 or more recent) attached. Use of a Customer <u>Patricia Verlangi</u>eri Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Boulogne Billancourt, France Thomson Licensing ☐ Individual ☐ Corporation or other private group ontity ☐ Government 4b. Payment of Fee(s): (Please first reapply any previously paid lasue fee shown above) Issue Fee A check is enclosed.

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